

Staple Issue Slip Here

POSITION	ID NO.	DATE
CLASSIFIER		
EXAMINER	443	3/14/96
TYPIST		
VERIFIER		
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

85
3-20-91

INDEX OF CLAIMS

Best Available Copy

Claim	Date
Final	
Original	
1	4
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SYMBOLS

- Rejected
- = Allowed
- (Through number) Canceled
- * Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

Claim	Date
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